tween pain and hematuria was noted in five other patients. To increase the likelihood of "catching" the hematuria, it may be reasonable to obtain the urine specimen during the period of maximal pain, collect serial urine specimens or do a timed urine collection. Prospective evaluation of this problem is needed.

The incidence of hematuria in patients with a symptomatic renal or ureteral calculus is not as high as previously believed; therefore, the absence of hematuria should not prematurely delete urolithiasis from the differential diagnosis of back, abdominal or groin pain. Physician examination of serial urine specimens collected during maximal pain may increase the detection of hematuria and aid in the diagnosis of urolithiasis.

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Medical Practice Question

EDITOR'S NOTE: *From time to time medical practice questions from organizations with a legitimate interest in the information are referred to the Scientific Board by the Quality Care Review Commission of the California Medical Association. The opinions offered are based on training, experience and literature reviewed by specialists. These opinions are, however, informational only and should not be interpreted as directives, instructions or policy statements.*

Biochemical Biopsy

QUESTION:

Is biochemical biopsy considered accepted medical practice?

OPINION:

In the absence of a specific clinical context and guidance by informed clinical judgment, it is the opinion of the Scientific Advisory Panel on Pathology that the value of such an extensive battery of laboratory tests as offered by biochemical biopsy is unknown. Biochemical biopsy involves a complex series of blood tests, the results of which are then analyzed by computer in an attempt to establish a diagnosis. Patients recommended for this procedure include those with vague patterns of symptomatology and no evident primary disease pattern, those not responding to therapies because of some secondary subclinical condition and those who cannot communicate their symptoms or complaints.

Computer analysis of laboratory data is accepted practice. It can shorten diagnostic time and can greatly assist clinicians both in diagnosis and treatment. The method proposed by the biochemical biopsy, however, suffers from blind overkill. Though most of the tests cited are valid and may give additional direction when used with discretion and ordered on the basis of clinical findings, other tests listed would be done at unnecessary expense. Occasionally, unsuspected pathologic conditions may be suggested by "blind" laboratory studies, but just as frequently misdirection may be the result. The accuracy and reliability of this method remain to be documented and its expense proved cost-effective.